## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

1803-331-999

| CLAIMS AS FILED - PART I                       |  |  |                                       |                                    |                        |                                  |          | SMALL ENTITY    |                        |         | OTHER THAN      |                        |  |
|--|--|--|---------------------------------------|------------------------------------|------------------------|----------------------------------|----------|-----------------|------------------------|---------|-----------------|------------------------|--|
| Γ <del>.</del> ,                               | OTAL OLABAS                              |  | (Column                               | (Column 1)                         |                        | (Column 2)                       |          | TYPE            |                        | OR      | OR SMALL ENTITY |                        |  |
| TOTAL CLAIMS                                   |  |  | 30                                    | 80                                 |                        |                                  | -        | RATE            | FEE                    | ]       | RATE            | FEE                    |  |
| FOR  |  |  | NUMBER                                | NUMBER FILED                       |                        | ER EXTRA                         |          | BASIC FEI       | 385.00                 | OR      | BASIC FEE       | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS                        |  |  | 80 minus 20=                          |                                    | . 60                   |                                  |          | X\$ 9=          |                        | OR      | X\$18=          | 1080                   |  |
| IN   | DEPENDENT C                              | LAIMS  | 2 /g/mi                               | inus 3 =                           | * -                    | 39                               |          | X43=            |                        | OR      | X86=            | 33 54                  |  |
| Μl   | JLTIPLE DEPEN                            | NDENT CLAIM P  | RESENT                                | SENT '                             |                        |                                  |          | +145=           |                        | OR      | +290=           | 20 - 1                 |  |
| *  1   | the difference                           | in column 1 is   | less than zero, enter "0" in column 2 |                                    |                        | olumn 2                          | ı        | TOTAL           | <del> </del>           | OR      |                 |                        |  |
| CLAIMS AS AMENDED - PART II                    |  |  |                                       |                                    |                        |                                  |          |                 |                        |         | OTHER           | THAN                   |  |
| (Column 1) (Column 2) (Column 3)               |  |  |                                       |                                    |                        |                                  |          | SMALL           | ENTITY                 | OR      | SMALL           |                        |  |
| AMENDMENT A                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                        |                                       | HIGHE<br>NUME<br>PREVIO<br>PAID F  | BER<br>JUSLY           | PRESENT<br>EXTRA                 |          | RATE            | ADDI-<br>TIONAL<br>FEE |         | RATE            | ADDI-<br>TIONAL<br>FEE |  |
|  | Total                                    | *  | Minus                                 | **                                 |                        | =                                |          | X\$ 9=          |                        | OR      | X\$18=          |                        |  |
|  | Independent                              | *  | Minus                                 | ***                                | OL A 13.4              | =                                |          | X43=            |                        | OR      | X86=            |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                       |                                    |                        |                                  |          | +145=           |                        | OR      | +290=           |                        |  |
| •  |  |  |                                       |                                    |                        |                                  |          | TOTAL           |                        |         | TOTAL           |                        |  |
|  |  | Д  | ADDIT. FEE                            |                                    | ] • · · ·              | ADDIT. FEE                       |          |                 |                        |         |                 |                        |  |
|  |  | (Column 1)<br>CLAIMS   |                                       | (Colum                             | ST                     | (Column 3)                       | Г        |                 | ADDI-                  | 1 6     |                 | ADDI-                  |  |
| AMENDMENT B                                    |  | REMAINING<br>AFTER<br>AMENDMENT                                  |                                       | NUMB<br>PREVIO<br>PAID F           | USLY                   | PRESENT<br>EXTRA                 |          | RATE            | TIONAL<br>FEE          |         | RATE            | TIONAL<br>FEE          |  |
| NDN  | Total                                    | *  | Minus                                 | **                                 |                        | =                                |          | X\$ 9=          |                        | OR      | X\$18=          |                        |  |
| AME  | Independent                              | *  | Minus                                 | ***                                |                        | =                                |          | X43=            | _                      | OR      | X86=            |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |  |                                       |                                    |                        |                                  |          | +145=           |                        | OR      | +290=           |                        |  |
|  | ,  |  |                                       |                                    |                        |                                  | L        | TOTAL           |                        | ļ L     | TOTAL           |                        |  |
|  |  |  |                                       |                                    |                        |                                  | Α        | DDIT. FEE       |                        | OR ,    | ADDIT. FEE      |                        |  |
| ,  |  | (Column 1)   |                                       | (Colum                             |                        | (Column 3)                       | _        |                 |                        |         |                 |                        |  |
| AMENDMENT C                                    |  | REMAINING<br>AFTER<br>AMENDMENT                                  |                                       | HIGHE<br>NUMB<br>PREVIOL<br>PAID F | ER<br>USLY             | PRESENT<br>EXTRA                 |          | RATE            | ADDI-<br>TIONAL<br>FEE |         | RATE            | ADDI-<br>TIONAL<br>FEE |  |
| NON  | Total                                    | *  | Minus                                 | **                                 |                        | =                                |          | X\$ 9=          |                        | OR      | X\$18=          |                        |  |
| AME  | Independent                              | *  | Minus                                 | ***                                |                        | =                                |          | X43=            |                        | OR      | X86=            |                        |  |
| _  | FIRST PRESE                              | NTATION OF MU  | ILTIPLE DEP                           | ENDENT                             | CLAIM                  |                                  | <b>-</b> |                 |                        | ا بن    |                 |                        |  |
| * H  | f the entry in colum                     | +145=  |                                       | OR                                 | +290=                  |                                  |          |                 |                        |         |                 |                        |  |
| ***  | f the "Highest Nun<br>f the "Highest Nur | mber Previously Pai<br>mber Previously Pa<br>ber Previously Paid | id For IN THIS<br>id For IN THIS      | SPACE is I<br>SPACE is             | less than<br>less than | 20, enter "20."<br>3. enter "3." |          | TOTAL DDIT. FEE |                        |         | TOTAL DDIT. FEE |                        |  |
|  | The Trightest Hulli                      | Del Freviously Fall  | TOU (IDIALO                           | maepenaen                          | ii) is me i            | nignest number                   | toun     | o in the app    | ropriate box           | in colu | IMN 1.          |                        |  |